Minder the Paperwork Reduction Act of 1995. r	no persons		tion of info	rademark Office; U.S. DEPARTMENT OF COMMERCE ormation unless it displays a valid OMB control number 55,235			
TRANSMITTAL	Filing Date	Sept	tember 4, 2003				
FORM (to be used for all correspondence after initial filing)		First Named Inventor	Faus	austo Casaro			
		Art Unit	3745	j			
		Examiner Name					
Total Number of Pages in This Submission		Attorney Docket Number	02-4	1 US			
	ENCL	OSURES (Check all th	at apply	)			
Fee Transmittal Form (2 copies)  Fee Attached  Amendment/Reply Preliminary  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application		Orawing(s)  cicensing-related Papers  Petition  Petition to Convert to a Provisional Application  Power of Attorney, Revocation  Change of Correspondence Add  Ferminal Disclaimer  Request for Refund  CD, Number of CD(s)	dress	After Allowance communication to Technology Center (TC)  Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Seven (7) References Return Receipt Postcard			
Response to Missing Parts under 37 CFR 1.52 or 1.53							
		F ADDI IOANY ATTON	NEV C	ND ACENT			
Firm	UKE 0	F APPLICANT, ATTOR	NEY, O	JK AGENT			
or Individual name Bela Fishman	,						
Signature Delle 17 16	man						

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PTO/SB/17 (10-03)

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			ıl	Complete if Known									
FEE TRANSMITTAL				Application Number 10/655					235				
for FY 2004				Filing Date Septe			eptem	nber 4, 2003					
Effective 10/01/2003. Patent fees are subject to annual revision.				First Named Inventor Fausto			austo	Casaro					
				Examiner Name									
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 3745				745						
TOTAL AMOUNT OF PAYMENT (\$) 180			Attorney Docket No. 02-41					2-41 L	JS	······································			
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)										
Check Credit card Money Other None			3. ADDITIONAL FEES Large Entity 1 Small Entity										
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Name The Director is authorized to: (check all that apply)			1053	130	1053			nglish specification					
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1002 340 2002	2 170 Design filing fee		1401	330	2401	165	Notice (	of Appea	al				
1003 530 2003	Plant filing fee		1402	330	2402	165	Filing a	brief in	support of an	n appeal			
1004 770 2004	Reissue filing fe	e	1403	290	2403	145	Reques	t for ora	l hearing				
1005 160 2005	5 80 Provisional filing	fee		1,510		1,510	Petition	to institu	ute a public ι	ise proceeding			
SUBTOTAL (1) (\$) 0			1452		2452	55	Petition	to reviv	ve - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1,330	2453	665	Petition	to reviv	e - unintentio	onal			
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**or number prev	*Red	duced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 180											
SUBMITTED BY					-				(Complete (	if applicable))			
Name (Print/Type)  Bella Eishppan				Registration No. (Attomey/Agent) 37,485					Telephone 650.424.5086				
Signature Belle Tishman				I MANUALINA					Date May 19, 2004				

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